	Initial Application
П	Amended Application

Date: 1/12/17





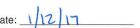
City of Tucson COMMITTEE STATEMENT **OF ORGANIZATION**

COMMITTEE ID NUMBER (office use only)

17-265-CT

first or last name & office)						
Candidate Information:	Candidate's Name (required):					
	Candidate's mailing address (required):		161			
	Candidate's email address (required):		0	Auen		
	Candidate's phone number (required):		CH		70-7	
	Candidate's website (if any):		70	=	<u> </u>	
Office Sought (choose one):	☐ Mayor ☐ Council Member, Ward		CE OF	12	3	
Election Cycle for Office Soug	tht (year the election will take place) (required):		-꽃로	4	5	
Party Affiliation: required)	☐ Democrat ☐ Libertarian ☐ Republican	Other:	LAG	<u>i</u>	æ	
☐ Political Action Comr Committee Name (required): (if sponsored, must include sponsor's name)	nittee (PAC)					
Political Function (optional):	☐ Contributions ☐ Candidate-Related Indep	ondent Evnenditu				
select any that apply)	A TOTAL MARKET AND AND STORM OF THE STORM OF	xpenditures	res			
	☐ Ballot Measure Expenditures ☐ Recall E	xpenditures				
(select any that apply) Sponsorship Information: (if applicable)		xpenditures				
Sponsorship Information:	□ Ballot Measure Expenditures □ Recall E Sponsor's name or nickname (required): Sponsor's mailing address (required): Sponsor's email address (required):	xpenditures				
Sponsorship Information:	□ Ballot Measure Expenditures □ Recall E Sponsor's name or nickname (required): Sponsor's mailing address (required): Sponsor's email address (required): Sponsor's phone number (if any):	xpenditures				
Sponsorship Information:	□ Ballot Measure Expenditures □ Recall E Sponsor's name or nickname (required): Sponsor's mailing address (required): Sponsor's email address (required):	xpenditures				
Sponsorship Information: (if applicable) Special Status must be file	Ballot Measure Expenditures Recall E Sponsor's name or nickname (required): Sponsor's mailing address (required): Sponsor's email address (required): Sponsor's phone number (if any): Sponsor's website (if any):	xpenditures ted Fund of a Cor	poration, LLC urate standing	c, Partnersh	nip, or Union	
Sponsorship Information: (if applicable) Special Status must be file	□ Ballot Measure Expenditures □ Recall E Sponsor's name or nickname (required): Sponsor's mailing address (required): Sponsor's email address (required): Sponsor's phone number (if any): Sponsor's website (if any): □ Separate Segrega □ Standing Committee (must a Mega PAC (must provide proof of Mega F	xpenditures ted Fund of a Cor lso complete sepa PAC status to filing	poration, LLC trate standing g officer) (amo	c, Partnersh	nip, or Union	
Sponsorship Information: if applicable) Special Status must be filed if applicable) Political Party Committee Name (required):	Ballot Measure Expenditures	xpenditures ted Fund of a Cor lso complete sepa PAC status to filing	poration, LLC trate standing g officer) (amo	c, Partnersh	nip, or Union	
Sponsorship Information: (if applicable) Special Status must be file (if applicable) Political Party Committee Name (required): (must include party affiliation	Ballot Measure Expenditures	ted Fund of a Corplete separates to filing	poration, LLC trate standing g officer) (amo	c, Partnersh g committee ended appli	nip, or Union	
Sponsorship Information: (if applicable) Special Status must be file (if applicable) Political Party Committee Name (required): (must include party affiliation	Ballot Measure Expenditures	ted Fund of a Corplete separate status to filing bertarian Party ursuant to A.R.S. pursuant to A.R.S.	ooration, LLC trate standing officer) (ame	c, Partnersh g committee ended appli s 16-804) r § 16-804)	nip, or Union	
Sponsorship Information: (if applicable) Special Status must be filed (if applicable) Political Party Committee Name (required):	Ballot Measure Expenditures	ted Fund of a Corplete separate to Status to filing about the status to filing about the status to A.R.S. pursuant to A.R.S. programization pursuant to status to pursuant to pursuant to status to	ooration, LLC arate standing officer) (ame	c, Partnersh g committee ended appli (§ 16-804) (r § 16-804) § 16-823)	nip, or Union e registration) ications only)	

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City of Tucson COMMITTEE STATEMENT OF ORGANIZATION

COMMITTEE ID NUMBER (office use only)

17-265-CT

COMMITTEE INFORMATION:

	Contact Information:	Committee's mailing address (required):	PO Box 11, Tucson, AZ 85702
		Committee's email address (required):	nola obair@nimala ara
		Committee's phone number (if any):	
		Committee's website (if any):	www.pimalp.org
	Chairperson's Information:	Chairperson's name (required):	Scott Stewart
		Chairperson's physical address (required): _	8401 E Appomattox St, Tucson, AZ 85710
		Chairperson's mailing address (if different): _	
		Chairperson's email address (required):	pclp_chair@pimalp.org
		Chairperson's phone number (required):	(520) 909-0464
		Chairperson's employer (required):	Control Vision, Inc
		Chairperson's occupation (required):	
	Treasurer's Information:	Treasurer's name (required):	9 34 1 34 1 3 1 1 1 1 1 1 1 1 1 1 1 1 1 1
		Treasurer's physical address (required):	0.40 = 0
		Treasurer's mailing address (if different):	
		Treasurer's email address (required):	treasurer@pimalp.org
		Treasurer's phone number (required):	(100) 001 1070
		Treasurer's employer (required):	Call Francisco d
		Treasurer's occupation (required):	Accountant
	Bank or Financial Institution:	Bank name (required):	Wells Fargo
	(do not list acct numbers)		
1		Additional bank name (if applicable):	

DECLARATION AND SIGNATURES:

I declare under penalty of perjury that the foregoing information is true and correct. I further declare that I: (1) consent to serve as chairperson or treasurer of the committee named herein, if applicable; (2) designate the above-named committee as my official candidate committee and authorize it to receive/make contributions/expenditures on my behalf, if applicable; (3) have read the Secretary of State's campaign finance and reporting guide; (4) agree to comply with Arizona election law, including campaign finance laws codified at A.R.S. §§ 16-901 to 16-938; and (5) agree to accept all notifications and legal service of process for campaign finance purposes via the email address(es) provided herein.

Chairperson's signature: Treasurer's signature: Candidate's signature (if applicable): Date: